AIR AND WATER COMPLAINT FORM

DIVISION OF MEASUREMENT STANDARDS 1 (800) 356-7057

41-016a/w (Rev. 07/01)

SIGNED

Please enter your name and address below:

COMPLAINT NUMBER	DATE RECEIVED		

TELEPHONE: EMAIL ADDRESS:

	(if applicable)						
requesting f were refused	ree air and water from the free air and water service idge Road, Sacramento	e attendant of e. Please co	on duty, was the equomplete and return the	uipment activated or were his complaint form to: L	chase gasoline or diesel fuel. After e you provided a token? If not, you Division of Measurement Standards, ay also visit our web site at		
	Г	I					
WHERE	STATION NAME			TELEPHONE			
ADDRESS			-				
CITY				COUNTY			
WHEN	DATE			TIME OF VIOLATION			
WHAT	DESCRIBE YOUR COMPLAINT BY USING THE CHECK BOXES AND ADDING REMARKS BELOW						
Toll free number not posted CUSTOMER COMPLAINT:							
Air not avail	lable						
Air not work	king						
Air not free	with fuel purchase						
Water not av	vailable						
Water not w	orking						
Water not fr	ee with fuel purchase						
Would you like to be informed of the result of your complaint investigation?							
			FOR OFFICIAL	L USE ONLY			
COMPLAINT REFERRED TO							
NAME (COID	NTY/STATE WEIGHTS A	ND MEASU	RES)				
NAME (COUNTY/STATE WEIGHTS AND MEASURES) ADDRESS CITY					TELEPHONE NO.		
HOW	FINAL DISPOSIT	ION					

TITLE

Hours: Mileage: DATE